

<b>HEALTH PLAN OF SAN JOAQUIN</b>			
<b>Subject: Developmental Disabilities Services Program</b>			
<b>Department:</b> Utilization Management			<b>Policy #:</b> UM53
<b>Applies to:</b> Medi-Cal			<b>Scope:</b> UM
<b>Effective Date:</b> 2/1/06	<b>Revised Date:</b> 3/06, 09/2008	<b>Approved by:</b>  <i>Signature on file</i> (Title of Sr. Exec.responsible)	

**DEFINITION:**

**Children with Special Health Care Needs (CSHCN)** (Adopted by DHS from the U.S. Maternal and Child Health Bureau's definition) is defined as: *"those who have or are at increased risk for a chronic physical, behavioral, developmental, or emotional condition and who also require health or related services of a type or amount beyond that required by children generally."*

**Developmental Disability:** *A disability which originates before an individual attains age 18, continues, or can be expected to continue, indefinitely, and constitutes a substantial disability for that individual. This term includes, mental retardation, cerebral palsy, epilepsy, autism and shall also include disabling conditions found to be closely related to mental retardation or to require treatment similar to that required for individuals with mental retardation, but shall not include other handicapping conditions that are solely physical in nature. (W&I Code S. 4512(a))*

**POLICY**

- A. The Health Plan of San Joaquin (HPSJ) is committed to assuring that all medically necessary screening, preventive, and therapeutic services are provided to members with developmental disabilities. It is the PCP and or referral specialist responsibility for the identification of adults with potentially eligible conditions and subsequent referral of those adults to appropriate programs for genetically handicapped persons. VMRC is the primary referral source in this county.
- B. HPSJ is committed to assuring that a system of diagnosis, counseling, case management, and community support is provided to members with mental retardation, cerebral palsy, epilepsy, and autism.

- C. HPSJ members identified as needing developmental disabilities services will be referred in San Joaquin County to Valley Mountain Regional Center (VMRC) which allows these members access to non-medical services not covered by the Plan. The Plan is responsible for providing all Medically necessary covered preventive and primary care services including Early Periodic Screening, Diagnosis and Treatment (EPSDT) supplemental services. The developmental disability must originate before the member attains age 18, continue indefinitely, and constitute a substantial disability.
- D. Medically necessary health care continues to be administered by the PCP throughout the referral process and regardless of whether or not the Member is accepted into a special program for the developmental disability.

### PROCEDURE

- A. Identification and Referral Procedures
1. Identification of the need for a referral for EPSDT services or a referral to VMRC may come from the PCP, referral specialist or any health care provider asked to evaluate a member developmental or mental growth pattern.
    - EPSDT service is a health screening, vision, hearing and dental services provided to beneficiaries under age 21 that are medically necessary treatment to correct or ameliorate a defect, physical or mental illness, or other medical condition. (P&P UM 48)
  2. As part of the Initial Health Assessment and routine health assessment (which will be done according to the American Academy of Pediatrics Periodicity Schedule), the Primary Care Provider (PCP) will identify individuals with significant developmental delay or those at risk for developmental disability and make the appropriate referral to VMRC, including the following information;
    - Reason for the referral
    - Complete medical history and physical examination, including appropriate developmental screens; and

- Results of developmental assessment/psychological evaluation and other diagnostic tests as indicated.
3. Parents who seek care through the Medi-Cal mental health benefit for their children may be referred through the mental health provider to VMRC.
  4. There are many forms of testing the physician may use to evaluate intellectual abilities. These testing tools are based on normal scales and are age related. The most commonly used tool to identify children with developmental disabilities (and the one that HPSJ PCPs are encouraged to use) is the Denver Developmental Screening Test.
  5. An aberration in the developmental evaluation is the foremost reason for referral for a pediatric neurological assessment. Such an assessment of development must determine whether there is a delay as opposed to a static or deteriorating condition. It is important to determine if failure is limited to specific areas of development or whether it encompasses all such areas.
  6. It is HPSJ policy that the PCP refer children to VMRC who fall four to six months below age-appropriate parameters or who exhibit conditions which point to the medical diagnoses listed below in 4.2, or have a risk factors found in Attachment A or diagnosis codes in Attachment B.
  7. Upon referral to VMRC, the PCP will contact the HPSJ Utilization Management Department to inform HPSJ of the referral. The Case Manager will work with the PCP and follow the case to assist in coordinating continuity of the member care. (UM51)
  8. Semi-annually, the Medical Management Department will run a report on those children under the care of VMRC to ensure that there is a medical history with the PCP for continuation of their health care that is the PCP's responsibility.
  9. If there is no history of a current health assessment for the member, the PCP will be notified of any members that fail to meet the annual health assessment screening.

B. Applicable Medical Diagnosis

1. Mental Retardation. Mental Retardation refers to subnormal general intellectual functioning and is associated with impairment

of learning and/or social maturation. Treatment should consist of a careful evaluation of the nature and severity of the impairment followed by provision of suitable programs of socialization, education, and medical treatment.

2. Cerebral Palsy. Cerebral Palsy is a term used for a group of persistent disorders of movement or posturing resulting from non-progressive damage to the growing brain. It should be suspected when there is fluctuation in muscle tone as the child's position is changed. Episodes of increased extension of the spine can occur. Persistence of the asymmetric tonic neck reflex beyond six months is a suspicious sign. Persistent fisting of the hand, with the thumb adducted in the palm, and scissoring of the legs (extension, adduction, and crossing when the child is held in vertical suspension) can be noted.
3. Autism. Autism is described by a clinical picture which is characterized by:
  - Onset prior to 30 months of age.
  - Bizarre responses to people and to various aspects of the environment with failure to develop normal attachment behavior and inability to tolerate physical human contact.
  - Impairment in communication, usually involving both verbal and nonverbal communication. Language skills may vary from none to immature, with bizarre grammatical structure, echolalia, and abnormal speech rhythm.
  - Bizarre response to the environment.
  - Unusual responses to sound.
  - A major complication of autism is the development of epilepsy.
4. Epilepsy. Epilepsy is a symptom of a disorder of the central nervous system characterized by abnormal electrical-chemical discharges in the brain. The discharge is expressed physically as a seizure. The type of seizure disorder varies. There may be a partial or complete loss of consciousness. Most seizures are controlled through the use of medications. Epilepsy is usually diagnosed by a neurologist.

C. Valley Mountain Regional Center Procedures (VMRC)

1. VMRC will evaluate all referrals to assess the member for eligibility. The evaluation will be conducted in a timely manner and provide appropriate educational material so that the family will be properly informed of the benefits of VMRC. A summary of the evaluation, and/or treatment plan will be sent back to the PCP for filing in the member's medical record.
2. An interdisciplinary team at VMRC will review the referral and assist in completing a needs assessment, setting objectives, program planning and evaluating effectiveness, considering the need for developmental programs or family support services which are not available from other generic or private resources.
3. VMRC will assist the member or family in the application process and will evaluate the member for non-medical services such as respite, out-of-home placement, supportive living, and other services designed for persons with substantial disabilities. The PCP and HPSJ UM department will be notified of these referrals.
4. Additionally, in cooperation with HPSJ, VMRC will provide case coordination to eligible members and their families in gaining access to needed nursing, educational, vocational, and social services.
5. When a member is accepted by VMRC, it will communicate its recommendations and the services which will be provided for the member to the PCP, the mental health provider if referred through mental health, and HPSJ Case Manager.
6. All health care providers involved in member's care will work together through patient care conference to share progress reports and to consider specific referral arrangements so that patient needs are met and that continuity of care is maintained. There will be times when family participation is necessary, and it will be arranged through the PCP, VMRC, or HPSJ Case Manager. Family participation will be encouraged.
7. Members under the care of VMRC who convert to HPSJ will be identified by VMRC through the Medical eligibility process. Once identified as a HPSJ member, VMRC will notify the HPSJ Case Manager to begin joint management of the patient's physical and mental health needs. The CM will inform the PCP of the members

conversion to HPSJ and introduce her/himself and their role in the CM process.

- D. Members with developmental disabilities that qualify for the Home and Community-Based Services (HCBS) waiver program are not covered under Medi-Cal HMO and will be referred to the State Department of Developmental Services (DDS) waiver program.
1. If DDS agrees with the member evaluation and there is available placement in the waiver program, the Member will receive waiver services while enrolled in the plan.
  2. Health Plan of San Joaquin will continue to cover all Medically Necessary Covered Services.
- E. Parents of children with disabilities or at risk for having children with developmental disabilities will be provided genetic counseling and other Medi-cal covered prenatal genetic services for persons at risk of parenting a child with developmental disability.
- F. Case Management and Care Coordination
1. Health Plan of San Joaquin Case Managers will case manage and coordinate activities such as, but not limited to, the following:
    - Log all members referred to VMRC and accepted into their program
    - Follow up with PCP's to ensure that the VMRC referred members are being followed for regular and routine medical conditions
    - Participate in the development of the individual member treatment plan with the PCP and VMRC staff.
    - Work with the PCP/Specialist to provide available medical documentation and reports, as requested to VMRC's Case Manager.
    - Follow-up and coordination of treatment plan between PCP, specialist, and VMRC
  2. Provider Training will be offered whenever necessary to ensure that providers and support staff delivering care to members with, or suspected of having developmental disabilities, are knowledgeable about the referral process and special health care needs of these members.

3. Problem Resolution will be a collaborative effort between the Plan CM and VMRC CM as stated in the MOU. Unresolved issues will be referred to the Plan Contract Manager and to the California Department of Developmental Services (DDS).

**REFERENCE**

- A. Title 22 Section 51184 and 51340
- B. DHS Contract Exhibit A, Attachment 11 section 9
- C. Memorandum Of Understanding (MOU) with Valley Mountain Regional Center (VMRC), California Children Service (CCS), and San Joaquin County Mental Health.
- D. Federal Balanced Budget Act 1997
- E. W & I Code Section, 4512(a), Section 4644
- F. Government Code Section, 95014 (a)
- G. Title 22, CCR, Section 51184, and Section 51185
- H. HPSJ Policy and Procedure UM 51 (CSHCN) Children with Special Health Care Needs – Identification of and Coordination or Care with VMRC/Early Start Program
- I. HPSJ Policy and Procedure UM 48 EPSDT Supplemental Services
- J. MMCD Policy Letter No. 97-03

Created by/Date	Revised by/Date	Revised by/Date	Revised by/Date	Revised by/Date	Revised by/Date
2/96	8/30/04 M. Jordan	2/1/06 DHS required statements M. Jordan RN	09/2008 D. Trinchera	10/2008 Reviewed by J Scott.	

## Attachment A

**Infants and toddlers from birth to 36 month of age may be eligible and benefit from early intervention services.**

**The Qualifying risk factors for service from the Early Start Program include:**

**A. High risk for developmental disability exists when an infant or toddler has a history of a combination of the following factors:**

- Very low birth weight of less than 1500 grams.
- Prematurity of less than 32 weeks gestation.
- Assisted ventilation for 48 hours or longer during the first 28 days of life.,
- Small of gestational age: below the third percentile on the National Center for Health Statistics Growth Charts.
- Asphyxia neonatorum associated with a five-minute apgar of 0 – 5.
- Severe and persistent metabolic problems (i.e., hypoglycemia, hypocalcemia, academia, hyperbilirubinemia in excess of the usual exchange transfusion level.)
- CNS infection/abnormality
- Seizure activity during first weeks of life or nonfebrile seizures during the first three years of life.
- Serious biomedical insult, including but not limited to, weight persistently below the third percentile for age on Standard Growth Charts or less than 85 percent of the ideal weight for age and/or acute weight loss of two or more percentiles on the growth curve.
- Multiple congenital abnormalities requiring specific services.
- Positive neonatal tox screen/drug withdrawal.
- Prolonged hypoxemia
- Hyperbilirubinemia
- Prenatal exposure to teratogens
- Significant failure to thrive.

- Chromosomal disorders,
- Inborn errors of metabolism,
- Neurological disorders,
- Visual and/or hearing impairments

**B. Clinical/Behavioral**

- Infant born to DD parent
- Persistent tonal problems

**C. Developmental Delay – if there is a significant difference between the infants or toddlers current level of functioning and the expected level of development for his or her chronological age in one or more of the following developmental areas:**

- Cognitive
- Physical and motor, including vision, hearing, and health status
- Communication
- Social/emotional
- Adaptive/self-help skills
- Identified as an individual with exceptional needs
- Identified as requiring intensive special education and services.

**D. Established Risk condition exists when an infant or toddler has a condition of known etiology which has a high probability of resulting in developmental delay**

- Chronic or disabling condition which, in the physician's judgement, would compromise the infant's development without treatment.

**E. Eligibility Determination Shall NOT be based on:**

- Temporary physical disability
- Cultural or economic factors;
- The normal process of second language acquisition; or

- Manifestation of dialect and social-linguistic variance.

**Attachment B**

**QUALIFYING DIAGNOSIS** as indicated by DHS

DIAGNOSIS	DESCRIP
20801	ACT LEUK UNS CL W RMSON
2080	ACT LEUK UNS CL W/O RMSN
20800	ACT LEUK UNS CL W/O RMSN
20401	ACT LYM LEUK W RMSION
20400	ACT LYM LEUK W/O RMSION
20501	ACT MYL LEUK W RMSION
20500	ACT MYL LEUK W/O RMSION
2040	ACUTE LYMPHOID LEUKEMIA
2050	ACUTE MYELOID LEUKEMIA
2983	ACUTE PARANOID REACTION
2969	AFFECT PSYCHOSES NEC/NOS
296	AFFECTIVE PSYCHOSES
29699	AFFECTIVE PSYCHOSES NEC
29690	AFFECTIVE PSYCHOSIS NOS
31501	ALEXIA
95217	ANTERIOR CORD SYN/T7-T12
95202	ANTERIOR CORD SYND/C1-C4
95207	ANTERIOR CORD SYND/C5-C7
95212	ANTERIOR CORD SYND/T1-T6
284	APLASTIC ANEMIA
2849	APLASTIC ANEMIA NOS
2848	APLASTIC ANEMIAS NEC
3151	ARITHMETICAL DISORDER
V08	ASYMP HIV INFECTN STATUS
29682	ATYPICAL DEPRESSIVE DIS
29681	ATYPICAL MANIC DISORDER
74913	BILAT CLEFT LIP-COMplete
74914	BILAT CLEFT LIP-INCOMPL
74903	BILAT CLEFT PALATE-COMPL
74904	BILAT CLEFT PALATE-INC
74923	BILAT CLFT PALAT/LIP-COM
74924	BILAT CLFT PALAT/LIP-INC
29656	BIPOL AFF DEPR-FULL REM
29655	BIPOL AFF DEPR-PART REM
29646	BIPOL AFF MANIC-FULL REM
29645	BIPOL AFF MANIC-PART REM
29653	BIPOL AFF, DEPR-SEVERE

29643	BIPOL AFF, MANIC-SEVERE
29640	BIPOL AFF, MANIC-UNSPEC
29663	BIPOL AFF, MIXED-SEVERE
29660	BIPOL AFF, MIXED-UNSPEC
29666	BIPOL AFF, MIX-FULL REM
29665	BIPOL AFF, MIX-PART REM
29654	BIPOL DEPR-SEV W PSYCH
29644	BIPOL MANIC-SEV W PSYCH
29664	BIPOL MIXED-SEV W PSYCH
29650	BIPOLAR AFF, DEPR-UNSPEC
29641	BIPOLAR AFF, MANIC-MILD
29661	BIPOLAR AFF, MIXED-MILD
29651	BIPOLAR AFFEC, DEPR-MILD
29652	BIPOLAR AFFEC, DEPR-MOD
29642	BIPOLAR AFFEC, MANIC-MOD
29662	BIPOLAR AFFEC, MIXED-MOD
2965	BIPOLAR AFFECT, DEPRESS
29670	BIPOLAR AFFECTIVE DISORDER, UN
2967	BIPOLAR AFFECTIVE NOS
2964	BIPOLAR AFFECTIVE, MANIC
2966	BIPOLAR AFFECTIVE, MIXED
33381	BLEPHAROSPASM
5792	BLIND LOOP SYNDROME
33393	BNIGN SHUDDERING ATTACKS
V424	BONE TRANSPLANT STATUS
95204	C1-C4 SPIN CORD INJ NEC
95200	C1-C4 SPIN CORD INJ NOS
95209	C5-C7 SPIN CORD INJ NEC
95205	C5-C7 SPIN CORD INJ NOS
745	CARDIAC SEPTAL CLOS ANOM
9524	CAUDA EQUINA INJURY
34460	CAUDA EQUINA SYND NOS
3446	CAUDA EQUINA SYNDROME
5790	CELIAC DISEASE
95218	CENTRAL CORD SYN/T7-T12
95203	CENTRAL CORD SYND/C1-C4
95208	CENTRAL CORD SYND/C5-C7
95213	CENTRAL CORD SYND/T1-T6
3303	CERB DEG CHLD IN OTH DIS
3308	CEREB DEGEN IN CHILD NEC
3309	CEREB DEGEN IN CHILD NOS
3302	CEREB DEGEN IN LIPIDOSIS
330	CEREBRAL DEGEN IN CHILD
3301	CEREBRAL LIPIDOSES
3438	CEREBRAL PALSY NEC

3439	CEREBRAL PALSY NOS
9520	CERVICAL SPINAL CORD INJ
29980	CHILD PSYCHOS NEC-ACTIVE
29981	CHILD PSYCHOS NEC-RESID
29990	CHILD PSYCHOS NOS-ACTIVE
29991	CHILD PSYCHOS NOS-RESID
3335	CHOREA NEC
20811	CHR LEUK UNS CL W RMSON
20810	CHR LEUK UNS CL W/O RMSN
20411	CHR LYM LEUK W RMSION
20410	CHR LYM LEUK W/O RMSION
2041	CHR LYMPHOID LEUKEMIA
20511	CHR MYL LEUK W RMSION
20510	CHR MYL LEUK W/O RMSION
2081	CHRONIC LEUKEMIA NOS
2051	CHRONIC MYELOID LEUKEMIA
7491	CLEFT LIP
74910	CLEFT LIP NOS
7490	CLEFT PALATE
749	CLEFT PALATE & CLEFT LIP
74925	CLEFT PALATE & LIP NEC
74920	CLEFT PALATE & LIP NOS
74900	CLEFT PALATE NOS
7492	CLEFT PALATE W CLEFT LIP
7450	COMMON TRUNCUS
7453	COMMON VENTRICLE
74510	COMPL TRANSPOS GREAT VES
95201	COMPLETE LES CORD/C1-C4
95206	COMPLETE LES CORD/C5-C7
95211	COMPLETE LES CORD/T1-T6
95216	COMPLETE LES CORD/T7-T12
7464	CONG AORTA VALV INSUFFIC
7463	CONG AORTA VALV STENOSIS
7468	CONG HEART ANOMALY NEC
74689	CONG HEART ANOMALY NEC
7469	CONG HEART ANOMALY NOS
3590	CONG HERED MUSC DYSTRPHY
7466	CONG MITRAL INSUFFICIENC
74601	CONG PULMON VALV ATRESIA
74602	CONG PULMON VALVE STENOS
74681	CONG SUBAORTIC STENOSIS
7461	CONG TRICUSP ATRES/STEN
2840	CONGEN APLASTIC ANEMIA
7465	CONGEN MITRAL STENOSIS
3430	CONGENITAL DIPLEGIA

74686	CONGENITAL HEART BLOCK
3431	CONGENITAL HEMIPLEGIA
3433	CONGENITAL MONOPLEGIA
3432	CONGENITAL QUADRIPLEGIA
3154	COORDINATION DISORDER
31540	COORDINATION DISORDER
7457	COR BILOCULARE
74682	COR TRIATRIATUM
V425	CORNEA TRANSPLANT STATUS
74685	CORONARY ARTERY ANOMALY
74512	CORRECT TRANSPOS GRT VES
3330	DEGEN BASAL GANGLIA NEC
2963	DEPR PSYCH, RECUR EPISOD
2962	DEPR PSYCH, SINGL EPISOD
29626	DEPR PSYCHOS-FULL REMISS
29625	DEPR PSYCHOS-PART REMISS
29624	DEPR PSYCHOS-SEV W PSYCH
29621	DEPRESS PSYCHOSIS-MILD
29623	DEPRESS PSYCHOSIS-SEVERE
29620	DEPRESS PSYCHOSIS-UNSPEC
29622	DEPRESSIVE PSYCHOSIS-MOD
3159	DEVELOPMENT DELAY NOS
3158	DEVELOPMENT DELAYS NEC
31531	DEVELOPMENT LANGUAGE DIS
31502	DEVELOPMENTAL DYSLEXIA
2502	DIAB W HYPEROSMOLAR COMA
2506	DIAB W NEUROLOGIC MANIF
2505	DIAB W OPHTHALMIC MANIF
2504	DIAB W RENAL MANIFEST
250	DIABETES MELLITUS
2500	DIABETES MELLITUS UNCOMP
2507	DIABETES W CIRCULAT DIS
2509	DIABETES W COMPLIC NOS
2501	DIABETES W KETOACIDOSIS
2508	DIABETES W MANIFEST NEC
2503	DIABETES WITH COMA NEC
3442	DIPLEGIA OF UPPER LIMBS
29910	DISINTEGR PSYCH-ACTIVE
29911	DISINTEGR PSYCH-RESIDUAL
2991	DISINTEGRATIVE PSYCHOSIS
25071	DMI CIRC NT ST UNCNTRLD
25073	DMI CIRC UNCNTRLD
25023	DMI HPROSMLR UNCONTROLLED
25021	DMI HPRSM NT ST UNCNTRLD
25011	DMI KETO NT ST UNCNTRLD

25013	DMI KETOACD UNCONTROL
25061	DMI NEURO NT ST UNCNTRLD
25063	DMI NEURO UNCNTRLD
25031	DMI O CM NT ST UNCNTRLD
25051	DMI OPHTH NT ST UNCNTRLD
25053	DMI OPHTH UNCNTRLD
25033	DMI OTH COMA UNCONTROL
25081	DMI OTH NT ST UNCNTRLD
25083	DMI OTH UNCNTRLD
25043	DMI RENAL UNCNTRLD
25041	DMI RENL NT ST UNCNTRLD
25091	DMI UNSPF NT ST UNCNTRLD
25093	DMI UNSPF UNCNTRLD
25001	DMI WO CMP NT ST UNCNTRL
25003	DMI WO CMP UNCNTRLD
25070	DMII CIRC NT ST UNCNTRLD
25072	DMII CIRC UNCNTRLD
25022	DMII HPROSMLR UNCONTROL
25020	DMII HPRSM NT ST UNCNTRL
25010	DMII KETO NT ST UNCNTRLD
25012	DMII KETOACD UNCONTROL
25060	DMII NEURO NT ST UNCNTRL
25062	DMII NEURO UNCNTRLD
25030	DMII O CM NT ST UNCNTRLD
25050	DMII OPHTH NT ST UNCNTRL
25052	DMII OPHTH UNCNTRLD
25032	DMII OTH COMA UNCONTROL
25080	DMII OTH NT ST UNCNTRLD
25082	DMII OTH UNCNTRLD
25042	DMII RENAL UNCNTRLD
25040	DMII RENL NT ST UNCNTRLD
25090	DMII UNSPF NT ST UNCNTRL
25092	DMII UNSPF UNCNTRLD
25000	DMII WO CMP NT ST UNCNTR
25002	DMII WO CMP UNCNTRLD
9521	DORSAL SPINAL CORD INJUR
74511	DOUBLE OUTLET RT VENTRIC
2998	EARLY CHLD PSYCHOSES NEC
2999	EARLY CHLD PSYCHOSIS NOS
7462	EBSTEIN'S ANOMALY
74569	ENDOCARD CUSHION DEF NEC
74560	ENDOCARD CUSHION DEF NOS
7456	ENDOCARD CUSHION DEFECTS
2823	ENZYME DEFIC ANEMIA NEC
34571	EPIL PAR CONT W INTR EPI

34570	EPIL PAR CONT W/O INT EP
34580	EPILEP NEC W/O INTR EPIL
34590	EPILEP NOS W/O INTR EPIL
3457	EPILEPS PARTIAL CONTINUA
345	EPILEPSY
3458	EPILEPSY NEC
34581	EPILEPSY NEC W INTR EPIL
3459	EPILEPSY NOS
34591	EPILEPSY NOS W INTR EPIL
2981	EXCITATIV TYPE PSYCHOSIS
333	EXTRAPYRAMIDAL DIS NEC
33399	EXTRAPYRAMIDAL DIS NEC
33390	EXTRAPYRAMIDAL DIS NOS
3339	EXTRPYRMIDAL DIS NEC/NOS
3593	FAMIL PERIODIC PARALYSIS
3420	FLACCID HEMIPLEGIA
34202	FLCCD HMIPLG NONDMNT SDE
34201	FLCCD HMIPLGA DOMNT SIDE
34200	FLCCD HMIPLGA UNSPF SIDE
33389	FRAGM TORSION DYSTON NEC
3338	FRAGMNT TORSION DYSTONIA
34511	GEN CNV EPIL W INTR EPIL
34510	GEN CNV EPIL W/O INTR EP
3451	GEN CONVULSIVE EPILEPSY
34501	GEN NONCONV EP W INTR EP
3450	GEN NONCONVULS EPILEPSY
34500	GEN NONCV EP W/O INTR EP
2822	GLUTATHIONE DIS ANEMIA
3453	GRAND MAL STATUS
28261	HB-S DISEASE W/O CRISIS
28262	HB-S DISEASE WITH CRISIS
V421	HEART TRANSPLANT STATUS
V422	HEART VALVE TRANSPLANT
342	HEMIPLEGIA
3429	HEMIPLEGIA NOS
2827	HEMOGLOBINOPATHIES NEC
2828	HERED HEMOLYTIC ANEM NEC
2829	HERED HEMOLYTIC ANEM NOS
3591	HERED PROG MUSC DYSTRPHY
2821	HEREDIT ELLIPTOCYTOSIS
282	HEREDIT HEMOLYTIC ANEMIA
2820	HEREDITARY SPHEROCYTOSIS
0429	HTLV-III/LAV AIDS W/VO OTHER C
0421	HTLV-III/LAV CAUSING OTHER SPE
0422	HTLV-III/LAV W/SPEC MALIGNANT

0420	HTLV-III/LAV WITH SPECIFIED CO
042	HUMAN IMMUNO VIRUS DIS
3334	HUNTINGTON'S CHOREA
7467	HYPOPLAS LEFT HEART SYND
3336	IDIOPAT TORSION DYSTONIA
34561	INF SPASM W INTRACT EPIL
34560	INF SPASM W/O INTR EPIL
2990	INFANTILE AUTISM
29900	INFANTILE AUTISM-ACTIVE
29901	INFANTILE AUTISM-RESID
343	INFANTILE CEREBRAL PALSY
3434	INFANTILE HEMIPLEGIA
3456	INFANTILE SPASMS
3596	INFL MYOPATHY IN OTH DIS
74683	INFUNDIB PULMON STENOSIS
5798	INTEST MALABSORPTION NEC
5799	INTEST MALABSORPTION NOS
5793	INTEST POSTOP NONABSORB
579	INTESTINAL MALABSORPTION
V4284	INTESTINES
V420	KIDNEY TRANSPLANT STATUS
20891	LEUKEMIA NOS W REMISSION
20890	LEUKEMIA NOS W/O REMSION
2088	LEUKEMIA-UNSPEC CELL NEC
2089	LEUKEMIA-UNSPEC CELL NOS
208	LEUKEMIA-UNSPECIF CELL
3300	LEUKODYSTROPHY
V427	LIVER TRANSPLANT STATUS
34481	LOCKED-IN STATE
9522	LUMBAR SPINAL CORD INJUR
V426	LUNG TRANSPLANT STATUS
204	LYMPHOID LEUKEMIA
2048	LYMPHOID LEUKEMIA NEC
2049	LYMPHOID LEUKEMIA NOS
1917	MAL NEO BRAIN STEM
1945	MAL NEO CAROTID BODY
1915	MAL NEO CEREB VENTRICLE
1916	MAL NEO CEREBELLUM NOS
1948	MAL NEO ENDOCRINE NEC
1949	MAL NEO ENDOCRINE NOS
1914	MAL NEO OCCIPITAL LOBE
194	MAL NEO OTHER ENDOCRINE
1946	MAL NEO PARAGANGLIA NEC
1913	MAL NEO PARIETAL LOBE
1912	MAL NEO TEMPORAL LOBE

1918	MALIG NEO BRAIN NEC
1919	MALIG NEO BRAIN NOS
1911	MALIG NEO FRONTAL LOBE
1941	MALIG NEO PARATHYROID
1943	MALIG NEO PITUITARY
1944	MALIGN NEO PINEAL GLAND
1940	MALIGN NEOPL ADRENAL
1910	MALIGN NEOPL CEREBRUM
191	MALIGNANT NEOPLASM BRAIN
74687	MALPOSITION OF HEART
2960	MANIC DIS, SINGL EPISODE
29606	MANIC DIS-FULL REMISSION
29601	MANIC DISORDER-MILD
29602	MANIC DISORDER-MOD
29603	MANIC DISORDER-SEVERE
29600	MANIC DISORDER-UNSPEC
29605	MANIC DIS-PARTIAL REMISS
29604	MANIC DIS-SEVERE W PSYCH
2961	MANIC, RECURRENT EPISODE
29689	MANIC-DEPRESSIVE NEC
2968	MANIC-DEPRESSIVE NEC/NOS
29680	MANIC-DEPRESSIVE NOS
319	MENTAL RETARDATION NOS
3155	MIXED DEVELOPMENT DIS
34432	MNPLG LWR LMB NONDMNT SD
34442	MNPLG UPR LMB NONDMNT SD
3180	MOD MENTAL RETARDATION
3445	MONOPLEGIA NOS
3443	MONOPLEGIA OF LOWER LIMB
3444	MONOPLEGIA OF UPPER LIMB
34431	MONPLGA LWR LMB DMNT SDE
34430	MONPLGA LWR LMB UNSP SDE
34441	MONPLGA UPR LMB DMNT SDE
34440	MONPLGA UPR LMB UNSP SDE
359	MUSCULAR DYSTROPHIES
205	MYELOID LEUKEMIA
2058	MYELOID LEUKEMIA NEC
2059	MYELOID LEUKEMIA NOS
2053	MYELOID SARCOMA
20531	MYL SRCOMA W RMSION
20530	MYL SRCOMA W/O RMSION
3332	MYOCLONUS
3595	MYOPATHY IN ENDOCRIN DIS
3598	MYOPATHY NEC
3599	MYOPATHY NOS

3592	MYOTONIC DISORDERS
34461	NEUROGENIC BLADDER
33392	NEUROLEPTIC MALGNT SYND
74684	OBSTRUCT HEART ANOM NEC
V4282	ORGAN OR TISSUE REPLACED BY TR
V4283	ORGAN OR TISSUE REPLACED BY TR
V4281	ORGAN OR TISSUEREPLACED BY TRA
V42	ORGAN TRANSPLANT STATUS
33384	ORGANIC WRITERS' CRAMP
33382	OROFACIAL DYSKINESIA
74561	OSTIUM PRIMUM DEFECT
34282	OT SP HMIPLG NONDMNT SDE
34281	OT SP HMIPLGA DOMNT SIDE
34280	OT SP HMIPLGA UNSPF SIDE
3152	OTH LEARNING DIFFICULTY
20881	OTH LEUK UNS CL W RMSON
20880	OTH LEUK UNS CL W/O RMSN
20481	OTH LYM LEUK W RMSION
20480	OTH LYM LEUK W/O RMSION
20581	OTH MYL LEUK W RMSION
20580	OTH MYL LEUK W/O RMSION
298	OTH NONORGANIC PSYCHOSES
344	OTH PARALYTIC SYNDROMES
34489	OTH SPCF PARALYTIC SYND
29880	OTHER AND UNSPECIFIED REACTIVE
746	OTHER CONGEN HEART ANOM
318	OTHER MENTAL RETARDATION
V4289	OTHER ORGAN OR TISSUE REPLACED
34409	OTHER QUADRIPLEGIA
31800	OTHER SPECIFIED MENTAL RETARDA
5794	PANCREATIC STEATORRHEA
3449	PARALYSIS NOS
3448	PARALYTIC SYNDROMES NEC
3441	PARAPLEGIA NOS
34551	PART EPIL W INTR EPIL
34550	PART EPIL W/O INTR EPIL
3455	PARTIAL EPILEPSY NEC
3452	PETIT MAL STATUS
3182	PROFOUND MENTAL RETARDAT
31820	PROFOUND MENTAL RETARDATION
2984	PSYCHOGEN PARANOID PSYCH
3454	PSYCHOMOTOR EPILEPSY
299	PSYCHOSES OF CHILDHOOD
2989	PSYCHOSIS NOS
34541	PSYMOTR EPIL W INTR EPIL

34540	PSYMOTR EPIL W/O INT EPI
74609	PULMONARY VALVE ANOM NEC
74600	PULMONARY VALVE ANOM NOS
7460	PULMONARY VALVE ANOMALY
3440	QUADRIPLEGIA NOS
34400	QUADRIPLEGIA, UNSPECIFD
34401	QUADRPLG C1-C4, COMPLETE
34402	QUADRPLG C1-C4, INCOMPLT
34403	QUADRPLG C5-C7, COMPLETE
34404	QUADRPLG C5-C7, INCOMPLT
2980	REACT DEPRESS PSYCHOSIS
2988	REACT PSYCHOSIS NEC/NOS
2982	REACTIVE CONFUSION
31509	READING DISORDER NEC
31500	READING DISORDER NOS
29634	REC DEPR PSYCH-PSYCHOTIC
31532	RECEPTIVE LANGUAGE DISORDER (M
29636	RECUR DEPR PSYC-FULL REM
29633	RECUR DEPR PSYCH-SEVERE
29635	RECUR DEPR PSYC-PART REM
29611	RECUR MANIC DIS-MILD
29612	RECUR MANIC DIS-MOD
29613	RECUR MANIC DIS-SEVERE
29610	RECUR MANIC DIS-UNSPEC
29616	RECUR MANIC-FULL REMISS
29615	RECUR MANIC-PART REMISS
29614	RECUR MANIC-SEV W PSYCHO
29631	RECURR DEPR PSYCHOS-MILD
29632	RECURR DEPR PSYCHOS-MOD
29630	RECURR DEPR PSYCHOS-UNSP
9523	SACRAL SPINAL CORD INJUR
20821	SBAC LEUK UNS CL W RMSON
20820	SBAC LEUK UNS CL W/O RMS
20421	SBAC LYM LEUK W RMSION
20420	SBAC LYM LEUK W/O RMSION
20521	SBAC MYL LEUK W RMSION
20520	SBAC MYL LEUK W/O RMSION
7455	SECUNDUM ATRIAL SEPT DEF
7458	SEPTAL CLOSURE ANOM NEC
7459	SEPTAL CLOSURE ANOM NOS
3181	SEVERE MENTAL RETARDAT
31810	SEVERE MENTAL RETARDATION
2826	SICKLE-CELL ANEMIA
28269	SICKLE-CELL ANEMIA NEC
28260	SICKLE-CELL ANEMIA NOS

2825	SICKLE-CELL TRAIT
28263	SICKLE-CELL/HB-C DISEASE
V423	SKIN TRANSPLANT STATUS
33383	SPASMODIC TORTICOLLIS
3421	SPASTIC HEMIPLEGIA
315	SPECIFIC DEVELOP DELAYS
3150	SPECIFIC READING DIS
31539	SPEECH/LANGUAGE DIS NEC
3153	SPEECH/LANGUAGE DISORDER
74101	SPIN BIF W HYDRCEPH-CERV
74102	SPIN BIF W HYDRCEPH-DORS
74103	SPIN BIF W HYDRCEPH-LUMB
74100	SPIN BIF W HYDROCEPH NOS
9528	SPIN CORD INJ-MULT SITE
7410	SPINA BIF W HYDROCEPHAL
741	SPINA BIFIDA
7419	SPINA BIFIDA
74190	SPINA BIFIDA
74191	SPINA BIFIDA-CERV
74192	SPINA BIFIDA-DORSAL
74193	SPINA BIFIDA-LUMBAR
952	SPINAL CORD INJ W/O FX
9529	SPINAL CORD INJURY NOS
34212	SPSTC HMIPLG NONDMNT SDE
34211	SPSTC HMIPLGA DOMNT SIDE
34210	SPSTC HMIPLGA UNSPF SIDE
33391	STIFF-MAN SYNDROME
2042	SUBAC LYMPHOID LEUKEMIA
2052	SUBACUT MYELOID LEUKEMIA
2082	SUBACUTE LEUKEMIA NOS
3337	SYMPTOM TORSION DYSTONIA
95214	T1-T6 SPIN CORD INJ NEC
95210	T1-T6 SPIN CORD INJ NOS
95219	T7-T12 SPIN CORD INJ NEC
95215	T7-T12 SPIN CORD INJ NOS
7452	TETRALOGY OF FALLOT
2824	THALASSEMIAS
3333	TICS OF ORGANIC ORIGIN
3594	TOXIC MYOPATHY
V428	TRANSPLANT STATUS NEC
V429	TRANSPLANT STATUS NOS
74519	TRANSPOS GREAT VESS NEC
7451	TRANSPOS OF GREAT VESSEL
3331	TREMOR NEC
5791	TROPICAL SPRUE

74921	UNIL CLEFT PALAT/LIP-COM
74922	UNIL CLEFT PALAT/LIP-INC
74911	UNILAT CLEFT LIP-COMPL
74912	UNILAT CLEFT LIP-IMCOMPL
74901	UNILAT CLEFT PALATE-COMP
74902	UNILAT CLEFT PALATE-INC
20491	UNS LYM LEUK W RMSION
20490	UNS LYM LEUK W/O RMSION
20591	UNS MYL LEUK W RMSION
20590	UNS MYL LEUK W/O RMSION
34291	UNSP HEMIPLGA DOMNT SIDE
34290	UNSP HEMIPLGA UNSPF SIDE
34292	UNSP HMIPLGA NONDMNT SDE
31900	UNSPECIFIED MENTAL RETARDATION
29890	UNSPECIFIED PSYCHOSIS
7454	VENTRICULAR SEPT DEFECT